

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

APPLICANT: Chien-Ping HUANG, Tzong-Da HO and Cheng-Hsu HSIAO

U.S.S.N.: Not Yet Assigned

FILED: Herewith

FOR: SEMICONDUCTOR PACKAGE WITH HEAT SINK



#3 / 155  
10-1-01  
R. Stokes

**INFORMATION DISCLOSURE STATEMENT**

Assistant Commissioner for Patents  
Washington, D.C. 20231

Dear Sir:

Pursuant to 37 C.F.R. §§ 1.97 and 1.98, applicant(s) hereby submit(s) an Information Disclosure Statement for consideration by the Examiner.

I. LIST OF PATENTS, PUBLICATIONS OR OTHER INFORMATION

The patents, publications or other information submitted for consideration by the Office are listed on PTO-1449, attached hereto.

II. COPIES

- a. ☒ Submitted herewith is a legible copy of (i) each U.S and foreign patent; (ii) each publication or that portion which caused it to be listed; and (iii) all other information or that portion which caused it to be listed.

III. CONCISE EXPLANATION OF THE RELEVANCE

All of the patents, publications or other information are in the English language or were cited in an English language Search Report, a copy of which is attached hereto (concise explanation not required).



**FEES**

IV. THIS IDS IS BEING FILED UNDER 37 C.F.R. § 1.97(b)  
(check one box)

- a. ☒ within three months of the filing date of a national application (37 C.F.R. § 1.97(b) (1)). No fee or certification is required.
- b. ☐ within three months of the date of entry of the national stage as set forth in §1.491 in an international application (37 C.F.R. § 1.97(b) (2)). No fee or certification is required.
- c. ☐ before the mailing date of a first Action on the merits (37 C.F.R. § 1.97(b) (3)). No fee or certification is required. In the event that a first Office Action on the merits has been issued, please consider this IDS under 37 C.F.R. § 1.97(c) and see the certification under 37 C.F.R. § 1.97(e) below, or, if no certification has been made, charge our deposit account a fee in the amount of \$240.00 as required by 37 C.F.R. § 1.17(p).

☒ No fee is required.

If the Examiner has any questions concerning this IDS, he/she is requested to contact the undersigned. If it is determined that this IDS has been filed under the wrong rule, the PTO is requested to consider this IDS under the proper rule (with a petition, if necessary) and charge the appropriate fee to Deposit Account No. 04-1105.

Respectfully submitted,

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